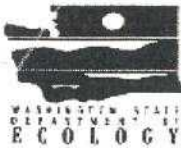


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CRD-YAKIMA

Underground Storage Tank

MAR 23 2009



DEPT OF ECOLOGY Toxics Cleanup Program

- Check those activities which apply:
- ☒ Tightness Testing Checklist
 - ☐ Retrofit/Repair Checklist
 - ☐ Cathodic Protection Checklist

The attached Underground Storage Tank (UST) checklists are required for each of the listed activities. The checklists certify that Tightness Testing, Retrofit/Repair and/or Cathodic Protection activities are performed and conducted in accordance with Chapter 173.360 WAC. **Complete this form and the corresponding UST checklist for each activity checked above.**

See back of form for instructions.

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1 UST SYSTEM LOCATION AND OWNER

UBI Number: 391 001 455 Site ID Number: _____
 (UBI # from Master Business License) (Available from Ecology if tank is registered)
 Site/Business Name: RH Smith Distributing Smitty's 140
 Site Address: 102 E. Toppenish Avenue
 Street Toppenish County WA
98948
 City State Zip+4 (required)
 Telephone: 509-865-5909
 UST Owner/Operator: RH Smith Distributing
 Mailing Address: PO Box 6
 Street Grandview P.O. Box WA 98930-0000
 City State Zip+4 (required)
 Telephone: 509 882 3377

APR 3 2009

EPA - WOO

2 FIRM PERFORMING WORK

Service Company: Northwest Tank & Environmental Services, Inc.
 Service Co. Address: 17407 59th Ave SE Snohomish
 Street Snohomish Washington County 98926
 City State Zip+4 (required)
 Certified Supervisor: James Han
 Address: 17407 59th Ave SE
 Street Snohomish Washington P.O. Box 98926
 City State Zip+4 (required)
 IFCI Certification Number: 5317749-U3 Certification issue Date (Month/Year): 08/24/2007
 Telephone: (425) 742-9622

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*Ecology is an equal opportunity and affirmative action employer
For special accommodation needs, please contact the Underground Storage Tanks Section at (360) 407-7170.*

Underground Storage Tank Tightness Testing Checklist

Site ID # _____

Site Address 102 E. Toppenish Avenue

City Toppenish

For more than four UST systems, you may photocopy this form prior to completing.

I. TIGHTNESS TESTING METHOD

Date of Test: 12/04/2008

1 Tightness testing method(s) used (indicate if more than one method was used):

Test method name/version/Manufacturer: LDT-890

Accurite Training and Services Corp.

Note: A tank must be tested up to the product level limited by the overfill prevention device. If an overfill prevention device is not installed, a tank must be tested up to the 95% full level. When underfill volumetric testing methods are used, the tank must be: 1) filled with product to the 95% full level or 2) the portion of the tank above the product level must be tested using a nonvolumetric method which meets performance standards, for tightness testing.

2 Indicate the method used to determine if groundwater was present above the bottom of the tank during the test (required for single wall tanks) N/A

3 Method used for release detection:

SIR

4. Reason for conducting tightness test:

Required Release Detection Method

5 Type of test conducted:

Lines and Leak Detectors

6. Test method type:

Volumetric

II. TEST METHOD CHECKLIST

The following items shall be initialed by the Certified Supervisor whose signature appears on this form.

Yes/No/NA Initials

1. Has the tightness testing method used been demonstrated to meet the performance standard specified in the UST rules for the conditions under which the test was conducted? (e.g., detecting a 0.10 gallon per hour leak rate with probability of detection of at least 95% and a probability of false alarm of no more than 5%)

Yes



2. Have all written testing procedures developed by the manufacturer of the testing equipment and method been followed while the test was being set up and

Yes



3. Was the product level in the tank during the test within the limitations of the test methods performance standards?

Yes



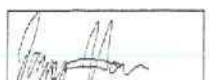
4. If groundwater was present above the bottom of the tank, have the testing procedures accounted for its presence? (required for single wall tanks)

N/A



5. If the tightness test is considered a failed test, has the owner/operator been notified of the test results? (Note: Tank owner must report a failed tightness test as a suspected release within 24 hours to UST staff at the appropriate Ecology

N/A



Site ID # _____
 Site Address 102 E. Toppenish Avenue
 City Toppenish

Tightness Testing Checklist (continued)

III. TANK INFORMATION CHECKLIST

1. Tank ID# (tank name registered with Ecology)	1	2	3			
2. Date installed						
3. Tank capacity in gallons	8000	6000	6000			
4. Last substance stored	Regular	Regular	Premium			
5. Number of tank compartments	1	1	1			
6. Tank type: (S) single wall; (D) double wall; (P) partitioned	SW	SW	SW			
7. Is overfill device present? (Yes/No)	Drop Tube	Drop Tube	None			
Tank ID Associated to each Tank Test						
8. Percentage of product in tank during test? (Volume % must comply with test method certification requirements)						
9. The test method used can detect a leak of how many GPH?	.05	.05	.05	.05	.05	.05
10. The numerical tank test results are? (In gallons per hour)						
11. Based on evaluating test results and conducting any retesting as necessary as per test protocol to obtain conclusive test results; the test results are?						

IV. Line and Leak Detector Information

Tank ID Associated to each Line						
1. Piping type: (S) single wall; (D) double wall	Single	Single	Single			
2. Pump type: (T) turbine; (S) suction	Pressure	Pressure	Pressure			
3. (a) If turbine, is leak detector present (Yes/No)	Yes	Yes	Yes			
(1) If present, was lead seal intact? (Yes/No/N/A)	N/A	N/A	N/A			
(b) If suction, check valve located at? (T) tank (P) pump	N/A	N/A	N/A			
4. The numerical line test results are? (gallons per hour)	-0.06375	-0.00375	-0.00375			
5. Line tightness test results? (Pass/Fail)	Fail	Pass	Pass			
Tank ID Associated to each Leak Detector						
Leak Detector Test Results? (Pass/Fail)	Pass	Pass	Pass			

* Inconclusive test results for tanks or piping will not be considered as valid tightness test for the purposes of complying with UST release detection regulations.

V. REQUIRED SIGNATURES

I hereby attest, that I have been the Certified Supervisor present during the above listed testing activities, and to the best of my knowledge they have been conducted in compliance with all applicable state and federal laws, regulations and procedures, pertaining to underground storage tanks.

Persons submitting false information are subject to formal enforcement and/or penalties under Chapter 173.360 WA.

12/04/2008

Date

Signature of Certified Supervisor

James Han

Printed Name



Date

Signature of Tank Owner/Authorized Representative

Printed Name